PATENT APPLICATION FEE DETERMINATION RECORD  Eff ctiv D cember 8, 2004  Application of Dock 1 Number  /0/559925												2 nwpei
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENT		OTHER THAN OR SMALL ENTITY		
Ù.S. N	NATIONAL :	STAGE FEES	(Colum	#1 <i>1)</i>	<u> </u>	Codum 2)	7	RATE	FEE	1	RATE	FEE
BASIC	FEE		SMALL EN	r. = \$ 150	LAR	3E ENT. = \$ 300	1	BASIC FEE	<u> </u>	OR	BASIC FEE	300
EXAMI	NATION FE	E	Satisfies PCT Article 33(1)- (4) ± \$50/\$100			her situations =	1	EXAM FEE			EXAM. FEE	200
SEARC	CH FEE .		U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All o	her situations = 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE FO	OR EXTRA S	PEC. PGS.	17	us 100 =		/50±	1	X \$ 125 =	125	1	X \$ 250 =	230
TOTAL	. CHARGEA	BLE CLAIMS	34 minus 20 =		•	141		X \$ 25 =	3775	OR	X \$ 50 =	700
INDEP	ENDENT CL	AIMS	2	ninus 3 =	• .			X \$ 100 =		OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRESENT							1.	+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	(F-100)	OR	TOTAL	1850
Column 1) (Column 2) (Column 3)							SMALL E	NTITY	OR	OTHER SMALL E		
ΑŁ		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT = 1	otal .	$\cdot M$	Minus	- i	71	a /		X \$ 25 =		OR	X \$ 50 =	
AME.	dependent	· 7	Minus		2	-		X \$ 100 =		OR	X\$ 200 =	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						.	+\$ 180=		OR	+\$ 380 =	
		•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE					
91	25/07	(Column 1)		(Colum	nn 2)	(Column 3)				•		
٤		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMB PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DAME.	otal	• 171	Minus	* /	7/	÷ /		X \$ 25 =		OR	X \$ 50 =	
AMENDMEN	dependent	2	Minus	*** 3		• . / ′	Ì	X \$ 100 =		OR	X \$ 200 =	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$ 180 =		OR	+ \$ 360 =	<i>[</i> ·
TOYAL ADDIT. / FEE										OR	TOTAL ADDIT. FEE	( .
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Pav. 02/2005)

Petent and Trademark Office - U.S. DEPARTMENT OF COMMERC